A close up of a address

Description automatically generated

ENVELOPE #

Website: **stjamesnorthmiami.org DATE / / /**

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| --- | --- | --- | --- | --- | --- |
| **PARISH REGISTRATION FORM** | | | | | |
| Family (Last) Name | Mailing Address (PO Box or Street) | | City | State | ZIP |
| Family’s Primary e-mail address | | Home Phone (Primary Phone | | | |

**Family Status:** Single  Widowed  Separated  Divorced  Married  (see below if yes)

Date of Marriage / / Were you married by a Catholic Priest? Yes  No  Civil Marriage  Common Law

**Head of the Household**

First Name: Middle Name: Last Name: Sex: F/M Suffix: Sr./Jr.\_

(Maiden Name): DOB: Religion: Occupation: \_

*(mm/dd/yyyy)*

Email:\_ Work Phone: Cell Phone:\_ \_

**Sacraments:**

Baptism: Y N First Eucharist Y N Reconciliation: Y N Confirmation: Y N

**Spouse**

First Name: Middle Name: Last Name: Sex: F/M Suffix: Sr./Jr.

(Maiden Name): DOB: Religion: Occupation: \_

*(mm/dd/yyyy)*

Email:\_ Work Phone: Cell Phone:\_ \_

**Sacraments:**

Baptism: Y N First Eucharist Y  N Reconciliation: Y N Confirmation: Y  N

**Dependents: Children under 18 and/or other adults living at home. Check Sacraments Received and the date if known**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| First Name Middle I. Last Name | F/M | Relationship | Date of Birth  mm/dd/yy | Baptism | 1st Eucharist | Reconciliation | Confirmation | Grade |
|  |  |  |  |  |  |  |  |  |
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**DO YOU WISH TO RECEIVE ENVELOPES? YES  NO**

**Thank you for taking the time to register. Please check our weekly bulletin and/or website for information regarding faith development, our many parish activities or ways you can volunteer to help our parish family.**

**-----------------------------------------------------------------------------------------------------------------------------------------------------------------**

***FOR OFFICE USE ONLY*** **ENV #: Posting Date: / / Initials:**